PROPOSAL SUMMARY AND DATA SHEET			RFP NUMBER:
NAME OF OFFEROR			EMPLOYER IDENTIFICATION NUMBER/SOCIAL SECURITY NUMBER
NAME OF INDIVIDUAL(S) AUTHORIZED TO NEGOTIATE	TITLE		TELEPHONE NUMBER
NAME OF INDIVIDUAL (S)			
NAME OF INDIVIDUAL(S) AUTHORIZED TO NEGOTIATE	TITLE		TELEPHONE NUMBER
NUMBER OF EMPLOYEES CURRENTLY DOLLAR VAL			JE OF BUSINESS PER ANNUM
This proposal is predicated upon all the terms and conditions of the above referenced RFP, and it is firm for days from the date of this proposal for acceptance thereof by the Government (120 Days, if not otherwise specified).			
NAME AND ADDRESS OF COGNIZANT GOVERNMENT AUDIT AGENCY COUNTY			NCY COUNTY
PHONE NUMBER OF COGNIZANT AGENCY			
ACKNOWLEDGEMENT OF AMENDMENTS – THE OFFEROR ACKNOWLEDGES RECEIPT OF AMENDMENTS TO THE RFP AS FOLLOWS:			
AMENDMENT NUMBER		DATE	SIGNATURE